SERIAL NO. FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) CLAIMS AFTER AFTER
1st AMENDMENT 2nd AMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND DEi 51 2 52 3; 53 54 5 55 ÷ 56 7 57 3 58 ĝ 59 <u>. ĵ</u> 60 61 : 2 62 63 <u>:</u> 64 : 5 65 . ö 66 67 :3 68 :9 69 <u>J0</u> 70 7.1 71 22 72 .23 73 J4 74 1/5 75 J5 76 77 .23 30 78 79 80 81 82 81 84 36 37 85 86. 87 <u> 35</u> 88 <u>وی</u> 80 40 90 91 1- 42 92 93 94 95 96 97 3 3 98 90 5 100 TOTAL TOTAL \*MAY BB USD FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT . COMMERCE

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